



RxEffect Provider Tool

MEDICARE ONLY

RxAnte offers an innovative quality platform called RxEffect. The platform is free to Provider groups and offers targeted patient lists, daily claim updates, and a strong workflow support for your practice to support medication adherence. Active use of the RxEffect tool has been shown to improve adherence, quality measure outcomes, and enrollee outreaches.

Be on the lookout for exciting new RxEffect Enhancements including:

- ✓ New PCP Attribution – Helps Providers engage more effectively in RxEffect
- ✓ Appointment Agendas – Available after March to capture HCCs and proper risk-adjustment
- ✓ Improved dashboard reporting and the ability to save filters for improved efficiency

- ✓ Polypharmacy Measures – Improves the ability to manage and outreach medically complex enrollees
- ✓ Bonus Incentive Program – Offers additional incentives for Providers active within the RxEffect tool during the program period

Check out the RxEffect Video here:

<https://www.youtube.com/watch?v=loEKiM7veZQ>

To learn more about RxEffect, visit www.rxante.com and speak with your Provider Relations and/or Quality representative.

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Join the Conversation on Social Media

Join our digital and social communities for up-to-date information on how we're working with you and others to help our members live better, healthier lives.





Good Measures Diabetes Prevention and Management Programs—Improve Quality and Outcomes

HELP YOUR PATIENTS START ON A HEALTHIER PATH AND REFER THEM FOR EXTRA SUPPORT FOR MANAGING DIABETES, LOSING WEIGHT, AND PREVENTING DIABETES.

Help your patients start on a healthier path and refer them for extra support for managing diabetes, losing weight, and preventing diabetes.

Programs are delivered by registered dietitians and diabetes educators online and by phone, making it easy for members to participate and stay engaged.

Good Measures offers a Diabetes Prevention Program and a Diabetes Self-Management Education program. The programs are free to WellCare of New Jersey Medicaid and Medicare members.



Food is Medicine – Food First Approach

Good Measures takes a “food-first” approach to prevention and condition management. “Food-first” means Good Measures coaches lead with food, which is engaging to members and is an effective way to make small healthy changes that lead to big results. Coaching is highly tailored to each member’s unique challenges and health.



The Good Measures Diabetes Self-Management Education Program

One-on-one personalized coaching helps members reach their goals and learn how food choices, activity, stress, and medication affect their blood sugar and how to better manage it.

The program also:

- Results in lower A1C—average 1.4% reduction.
- Supports patients in building and sustaining coping skills needed to self-manage diabetes.
- Addresses patients’ health beliefs, cultural needs, current knowledge, physical limitations, emotional concerns, family support, financial status, medical history, social determinants of health, health literacy, numeracy – all that affect ability to self-manage.
- Promotes A1C testing, eye exams, nephrology exam, and medication adherence.



The Good Measures Diabetes Prevention Program

This CDC-recognized program combines group support, one-on-one coaching, and food and activity guidance using the Good Measures app and website.

The program also:

- Promotes building healthy and sustainable habits that prevent progression to type 2 diabetes.
- Supports members in losing weight in a healthy way—average 6% weight loss.
- Helps members overcome barriers to being physically active and make activity a part of daily life.

How to refer patients

- Complete the secure referral form on goodmeasures.com/physicians OR
- Download the form and it fax to Good Measures at **617-507-8576**.



Medication Adherence and RxEffect™

To help with medication adherence, WellCare engages our members with refill reminder phone calls, off-therapy (missed dose) phone calls and letters as well as utilizing our network pharmacies to help counsel our members. However, there is nothing as powerful as a reminder from the member's primary care provider about the importance of medication adherence.

RxEffect™ is an online platform available to WellCare Medicare provider groups to help improve members' medication use. Talk to your WellCare associate today to get users from your office access to the RxEffect™ portal.

This web portal:

- ✓ Is sponsored by WellCare – so there is no cost to our provider partners
- ✓ Uses predictive modeling to target the patients who need it most
- ✓ Uses real-time monitoring of pharmacy claims and is updated daily
- ✓ Includes opportunity flags for 30-day conversions, diabetic patients not on statins, Appointment Agendas and high-risk medications



Appointment Access and Availability

WellCare is required by the Centers for Medicare & Medicaid Services and state regulations to administer appointment access and availability audits. Appointment Access standards are documented below.

-  **Emergency services:** Immediately upon presentation
-  **Urgent Care:** Less than 24 hours
-  **Symptomatic acute care:** Less than 72 hours
-  **Routine non-symptomatic visits, including annual gynecological examinations or pediatric and adult immunization visits:** Less than 28 days
-  **Specialist referrals:** Less than 4 weeks
-  **Urgent Specialty Care:** Within 24 hours of referral
-  **Baseline physicals for new adult enrollees:** Within 180 calendar days of initial enrollment
-  **Baseline physicals for new children enrollees and adult clients of DDD:** Within 90 days of initial enrollment, or in accordance with EPSDT guidelines.
-  **Prenatal care:**
 - Within 3 weeks of a positive pregnancy test
 - Within 3 days of identification of high-risk
 - Within 7 days of request in first and second trimester
 - Within 3 days of first request in third trimester
-  **Routine physicals:** Within 4 weeks
-  **Lab and radiology services:**
 - Within 3 weeks for routine
 - Within 48 hours for urgent care
-  **Initial pediatric appointments:** Within 3 months of enrollment
-  **Dental appointments:**
 - **Emergency:** No later than 48 hours, or earlier as the condition warrants, of injury to sound natural teeth and surrounding tissue and follow-up treatment by a dental provider
 - **Urgent:** Within 3 days of referral
 - **Routine:** Within 30 days of referral
-  **MH/SA appointments:**
 - **Emergency services:** Immediately upon presentation at a service delivery site
 - **Urgent:** Within 24 hours of the request
 - **Routine:** Within 10 days of the request
-  **Maximum number of intermediate/limited patient encounters for PCPs and Pediatricians:** 4 per hour for adults and children.
-  **Waiting time in office:** Less than 45 minutes

For additional information, please refer to the Provider Manual posted on the WellCare Provider Portal located at: www.wellcare.com/New-Jersey/Providers/Medicaid.



Electronic Funds Transfer (EFT) Through PaySpan®

FIVE REASONS TO SIGN UP TODAY FOR EFT:

- 1 You** control your banking information.
- 2 No** waiting in line at the bank.
- 3 No** lost, stolen, or stale-dated checks.
- 4** Immediate availability of funds - **no** bank holds!
- 5 No** interrupting your busy schedule to deposit a check.

Setup is easy and takes about five minutes to complete. Please visit <https://www.payspanhealth.com/nps> or call your Provider Relations representative or PaySpan at **1-877-331-7154** with any questions.

We will only deposit into your account, **not** take payments out.



Provider Formulary Updates

Medicaid:

The Preferred Drug Lists (PDL) has been updated. Visit www.wellcare.com/WellCare/New-Jersey/Providers/Medicaid/Pharmacy to view the current PDL and pharmacy updates.

Medicare:

There have been updates to the Medicare formulary. Find the most up-to-date, complete formulary at www.wellcare.com/New-Jersey/Providers/Medicare/Pharmacy.

You can also refer to the Provider Manual to view more information regarding our pharmacy Utilization Management (UM) policies and procedures. Provider Manuals are available at www.wellcare.com/New-Jersey/Providers/Medicaid and www.wellcare.com/New-Jersey/Providers/Medicare.



It Benefits Your Practice To Keep Your Provider Demographic Information Current

As a WellCare participating provider, it is very important for you to keep your demographic information current.

When you update your information with WellCare to keep it current, it helps:

- ✓ Ensure you and your practice/facility receive proper notifications from WellCare
- ✓ Avoid claim payment issues caused by outdated demographic information
- ✓ Ensure you receive proper referrals based on your specialty and/or subspecialty
- ✓ Ensure members who need to contact you for services have your correct address/phone number

To ensure this occurs, if any of the following changes, please tell us in advance or as soon as possible:

- Office phone number
- Fax Number
- Office address
- Correspondence Address
- Office Hours
- Hospital Affiliation
- Panel status (Are you accepting new Medicare/Medicaid patients?)
- National Provider Identifier (NPI)
- Tax Identification Number (TIN)
- Group Name

To submit your updated information:

Per your contract, at least 30 days' advance notice is required and you should include contact information in case we need to follow up with you.



Emailing:

NJPR@wellcare.com



Call:

1-855-538-0454



Mail a letter on your letterhead with the updated information to:

WellCare Health Plans of NJ

550 Broad St. 12th floor

Newark, NJ 07102

Attention: Provider Relations Department

Thank you for keeping your information up to date with us. WellCare appreciates everything you do to improve the health and well-being of our members.



21st Century Cures Act

ALL PARTICIPATING PROVIDERS MUST ENROLL WITH NJFC MEDICAID FEE-FOR-SERVICE (FFS) PROGRAM IN ACCORDANCE WITH THE 21ST CENTURY CURES ACT REQUIREMENTS.

The State of New Jersey Department of Human Services Division of Medical Assistance & Health Services sent the Medicaid Newsletter Volume 28 No. 06, which notified network providers of the requirement that they enroll in the NJFC Medicaid FFS program. The 21st Century Cures Act, 42 U.S.C. 1396u-2(d), requires that network providers complete the 21st Century Cures Act provider application. Compliance is mandatory and failure to comply may result in a provider's contract with an MCO being terminated per the Medicaid Newsletter.

Network providers must submit a completed 21st Century Cures Act application to DXC Technology. Providers under contract with multiple MCOs are only required to submit a single 21st Century Cures Act application to DXC Technology. To download a 21st Century Cures Act application, go to www.njmmis.com, select "Provider Enrollment Applications," and then select 21st Century Cures Act Application as the "Provider Type."

Frequently Asked Questions

1

Whom can I contact if I have questions about the application?



Contact the DXC Technology Provider Enrollment Unit at **1-609-588-6036**.

2

Where can I submit the 21st Century Cures application?



The mailing address for submitting the application and credentials is:

**DXC Technology Provider Enrollment Unit
P.O. Box 4804
Trenton, NJ 08650**



The completed application with credentials may also be faxed to **1-609-584-1192**.



Provider Bulletins

Remember to view the online Provider Bulletins regularly for important updates and notices.

Visit www.wellcare.com; select your state, click on *Providers*, scroll down and click on *READ BULLETINS*.



Provider Resources

Provider News – Provider Portal

Remember to check messages regularly to receive new and updated information. Access the secure portal using the *Secure Login* area on our home page. You will see *Messages from WellCare* on the right.

Resources and Tools

Visit www.wellcare.com/New-Jersey/Providers to find guidelines, key forms and other helpful resources for both Medicare and Medicaid. You may also request hard copies of documents by contacting your Provider Relations representative. Refer to our Quick Reference Guide for detailed information

on many areas such as Claims, Appeals, Pharmacy, etc. These are located at www.wellcare.com/New-Jersey/Providers/Medicaid or www.wellcare.com/New-Jersey/Providers/Medicare.

Additional Criteria Available

Please remember that all Clinical Guidelines detailing medical necessity criteria for several medical procedures, devices and tests are available on our website at www.wellcare.com/New-Jersey/Providers/Clinical-Guidelines.

We're Just a Phone Call or Click Away



Medicare:
1-855-538-0454



Medicaid:
1-888-453-2534



www.wellcare.com/New-Jersey/Providers